

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS5088HWH	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/13/2010
NAME OF PROVIDER OR SUPPLIER WALTER HOVING HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 3353 RED ROCK ST LAS VEGAS, NV 89146		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
WW000	<p>INITIAL COMMENTS</p> <p>This Regulation is not met as evidenced by: The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an initial State Licensure survey conducted at your facility on 4/13/10.</p> <p>The survey was conducted using Nevada Administrative Code (NAC) 449, Halfway Houses for Recovering Alcohol and Drug Abusers Regulations, adopted by the Nevada State Board of Health on December 17, 2001 with an effective date of 01/01/02.</p> <p>The facility is requesting licensure for ten beds for recovering alcohol and drug abusers. The census at the time of the survey was nine.</p> <p>The following deficiencies were identified:</p>	WW000		
WW005 SS=F	<p>ADMINISTRATOR QUALIFICATIONS</p> <p>NAC 449.15491 An administrator must: (2) Have the tests and obtain the certifications required by NAC 441A.375 for a person employed in a facility for the dependent;</p>	WW005		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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WW045	Continued From page 2 On 4/13/10, the facility was requesting a license for ten beds. The facility had ten beds set-up. The maximum number of beds authorized for this facility is eight beds. Two bedrooms were over capacity for beds. Bedroom #1 had four beds. Bedroom #1 measured 156 square feet enough for three beds. Bedroom #2 had six beds. Bedroom #2 measured 233 square enough for five beds Severity: 1 Scope: 3	WW045			
WW079 SS=F	CLIENT FILES; MAINTENANCE; CONTENTS; CONFIDEN NAC 449.154943: (1) An administrator shall ensure that the facility maintains a separate file for each client of the facility and retains the file for at least 5 years after the client permanently leaves the facility. The file must be kept locked in a location that is protected against unauthorized use. Each file must contain the information obtained by the facility that is related to the client, including, without limitation: (d) Evidence of compliance with the provisions of NAC 441A.380.	WW079			

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WW079	Continued From page 3 This Regulation is not met as evidenced by: Based on record review on 4/13/10, the facility failed to ensure 9 of 9 residents complied with NAC 449.380 regarding tuberculosis (TB) testing . Findings include: All residents files contained evidence of a one-step TB skin test. The files lacked evidence of a second step TB skin test. Severity: 2 Scope: 3	WW079		
WW081 SS=C	CLIENT FILES; MAINTENANCE; CONTENTS; CONFIDEN NAC 449.154943: (1) An administrator shall ensure that the facility maintains a separate file for each client of the facility and retains the file for at least 5 years after the client permanently leaves the facility. The file must be kept locked in a location that is protected against unauthorized use. Each file must contain the information obtained by the facility that is related to the client, including, without limitation: (f) The name and telephone number of the vendors and medical professionals that provide services for the client.	WW081		

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WW081	Continued From page 4 This Regulation is not met as evidenced by: Based on record review on 4/13/10, the facility failed to ensure 9 of 9 residents complied with NAC 449.154943 regarding the name and telephone number of medical professionals listed in the client's file Findings include: All resident's files lacked the name and telephone number of the vendors and medical professionals that provide services for the client. Severity: 1 Scope: 3	WW081		
WW091 SS=F	SAFETY FROM FIRE NAC 449.154945: 5. Smoke detectors installed in a facility must be maintained in proper operating condition at all times and must be tested monthly. The results of the tests conducted pursuant to this subsection must be recorded and maintained at the facility. This Regulation is not met as evidenced by: Based on observation on 4/13/10, the facility failed to ensure installed smoke detectors were tested monthly. Findings include: On 4/13/10, the facility lacked evidence of monthly smoke detector testing.	WW091		

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WW091	Continued From page 5 Severity: 1 Scope: 3	WW091		
WW093 SS=F	<p>NAC 449.441A.375 Management of cases and suspected cases</p> <p>NAC 441A.375: Medical facilities, facilities for the dependent and homes for individual residential care: Management of cases and suspected cases; surveillance and testing of employees; counseling and preventive treatment.</p> <p>1. A case having tuberculosis or suspected case considered to have tuberculosis in a medical facility or a facility for the dependent must be managed in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>2. A medical facility, a facility for the dependent or a home for individual residential care shall maintain surveillance of employees of the facility or home for tuberculosis and tuberculosis infection. The surveillance of employees must be conducted in accordance with the recommendations of the Centers for Disease Control and Prevention for preventing the transmission of tuberculosis in facilities providing health care set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have a:</p> <p>(a) Physical examination or certification from a licensed physician that the person is in a state of good health, is free from active tuberculosis and any other communicable disease in a contagious</p>	WW093		

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WW093	<p>Continued From page 6</p> <p>stage; and</p> <p>(b) Tuberculosis screening test within the preceding 12 months, including persons with a history of bacillus Calmette-Guerin (BCG) vaccination.</p> <p>If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the facility or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>4. An employee with a documented history of a positive tuberculosis screening test is exempt from screening with skin tests or chest radiographs unless he develops symptoms suggestive of tuberculosis.</p> <p>5. A person who demonstrates a positive tuberculosis screening test administered pursuant to subsection 3 shall submit to a chest radiograph and medical evaluation for active tuberculosis.</p> <p>6. Counseling and preventive treatment must be offered to a person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200.</p> <p>7. A medical facility shall maintain surveillance of employees for the development of pulmonary symptoms. A person with a history of tuberculosis</p>	WW093			

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WW093	<p>Continued From page 7</p> <p>or a positive tuberculosis screening test shall report promptly to the infection control specialist, if any, or to the director or other person in charge of the medical facility if the medical facility has not designated an infection control specialist, when any pulmonary symptoms develop. If symptoms of tuberculosis are present, the employee shall be evaluated for tuberculosis.</p> <p>This Regulation is not met as evidenced by: NAC 441A.375 Medical facilities, facilities for the dependent and homes for individual residential care: Management of cases and suspected cases; surveillance and testing of employees; counseling and preventive treatment.</p> <p>1. A case having tuberculosis or suspected case considered to have tuberculosis in a medical facility or a facility for the dependent must be managed in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>2. A medical facility, a facility for the dependent or a home for individual residential care shall maintain surveillance of employees of the facility or home for tuberculosis and tuberculosis infection. The surveillance of employees must be conducted in accordance with the recommendations of the Centers for Disease Control and Prevention for preventing the transmission of tuberculosis in facilities providing health care set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have a:</p> <p>(a) Physical examination or certification from a</p>	WW093		

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WW093	<p>Continued From page 8</p> <p>licensed physician that the person is in a state of good health, is free from active tuberculosis and any other communicable disease in a contagious stage; and</p> <p>(b) Tuberculosis screening test within the preceding 12 months, including persons with a history of bacillus Calmette-Guerin (BCG) vaccination.</p> <p>If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the facility or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>4. An employee with a documented history of a positive tuberculosis screening test is exempt from screening with skin tests or chest radiographs unless he develops symptoms suggestive of tuberculosis.</p> <p>5. A person who demonstrates a positive tuberculosis screening test administered pursuant to subsection 3 shall submit to a chest radiograph and medical evaluation for active tuberculosis.</p> <p>6. Counseling and preventive treatment must be offered to a person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200.</p>	WW093			

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WW093	<p>Continued From page 9</p> <p>A medical facility shall maintain surveillance of employees for the development of pulmonary symptoms. A person with a history of tuberculosis or a positive tuberculosis screening test shall report promptly to the infection control specialist, if any, or to the director or other person in charge of the medical facility if the medical facility has not designated an infection control specialist, when any pulmonary symptoms develop. If symptoms of tuberculosis are present, the employee shall be evaluated for tuberculosis. (Added to NAC by Bd. of Health, eff. 1-24-92; A 3-28-96; R084-06, 7-14-2006)</p> <p>Based on record review on 4/13/10, it was determined the facility failed to document a tuberculin test and pre-employment physical on 2 of 2 employees.</p> <p>Findings include:</p> <p>Employee's #2 and #3 personnel files lacked the health certificates required pursuant to chapter 441A of NAC for the employee (tuberculin testing) and pre-employment physicals.</p> <p>Severity: 2 Scope: 3</p>	WW093		

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